

Free Care

Answering your questions about the
Massachusetts Uncompensated Care Pool

Notes

This newsletter is intended to answer questions about Free Care eligibility, and to help hospitals and community health centers understand the free care eligibility regulation, 114.6 CMR 10.00.

If you have questions about free care eligibility, please contact the Division of Health Care Finance and Policy at 617-988-3222.

Please share this newsletter with everyone at your facility who assists patients with free care applications.

Student Health Insurance

Massachusetts law requires all full-time and part-time (>75% course load) college and graduate students to either purchase health insurance through their school or provide evidence to the school that they have other comparable health insurance (114.6 CMR 3.03). Colleges and universities are required to enforce this law. Because free care is not health insurance, students cannot waive participation in their school's health insurance program based on their eligibility for free care at a hospital or community health center. Students cannot apply for free care as an alternative to purchasing their school's health insurance plan. Students may only apply for free care to pay for deductibles, balances after insurance, and medically necessary services not covered by their health insurance policy. If you have additional questions, please call 617-988-3106.

Documentation

A picture ID is not required documentation for the free care application. While several acceptable forms of residency documentation, such as a driver's license, do include a photograph, a picture ID is not required. Applicants who are homeless may provide affidavits as proof of residency and income if they have no income or residency documentation. A statement of support from a homeless shelter is not required. Please refer to Appendix B of *The Free Care Application: A Guide for Acute Hospitals and Community Health Centers* for a complete list of acceptable documentation.

Social Security Numbers

Social Security Numbers are an important part of the free care application, and must be obtained whenever possible. Note that the free care application clearly states that if a Social Security Number has been issued, it must be included on the application. When available, Social Security Numbers must also be included on any claims submitted to the Division of Health Care Finance and Policy.

Contact Information

Please be sure to include provider contact information on all free care eligibility letters. The Division receives many calls on the free care help line from applicants trying to reach the providers where they applied for free care. While we are happy to assist these people, our help line staff do not have desktop access to individuals' free care application data and therefore must refer them back to the provider. Clearly including provider contact information on all free care notifications will ensure that patients are able to quickly and easily contact the provider when necessary and save them this extra step.

Applying for Free Care at More than One Provider

People may apply for free care at more than one provider. People who are approved for free care at one provider who wish to apply for free care at a second provider may apply for free care at the second provider by signing a condensed free care application at the second provider. The second provider must obtain a copy of the applicant's original free care application and documentation and use the application to verify the applicant's eligibility. If the second provider cannot obtain a copy of the application from the first provider, that provider must obtain a new full application from the applicant with documentation. See 114.6 CMR 10.04(3)(b)5.

The Boston Medical Center CareNet Plan and Cambridge Health Alliance's NetA plan are free care by another name. Therefore, CareNet and NetA patients who present for care at non-BMC or non-CHA providers (even if these providers are contracted CareNet or NetA providers) must apply for free care using the procedure described above. A copy of the CareNet or NetA Free Care card is not sufficient documentation for billing the Uncompensated Care Pool.

Jane Swift
Governor

Robert P. Gittens
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Division of Health Care
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Electronic Transfer of Funds

The Division of Health Care Finance and Policy (DHCFP) recently learned that the Office of the State Comptroller will soon be requiring all vendors to arrange for electronic transfer of funds with their banks. This means that in order to be paid by the Pool, all providers must have these arrangements in place.

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 ***Are you the correct contact person at your site for this information? Are your name and address correct?***
Please note any changes directly on this label and send to the address above or fax to Shelley Fortier at 617-727-7662.

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Access to Health Care in Massachusetts: A Catalog of Health Care Programs for Uninsured and Underinsured Individuals, 2002 Edition

Updated with revised income guidelines, eligibility criteria, and information on several new programs, this valuable resource will be available in early January. Designed as a comprehensive resource for providers, this catalog contains detailed information on over 75 federal, state, and local programs. It includes programs ranging from MassHealth and Medicare to free dental clinics and discount prescription drug plans. We hope that this catalog, which provides information on eligibility guidelines, the range of services covered, and how to apply, will facilitate access to health care by helping to refer individuals to the most comprehensive health care programs for which they qualify. One complimentary copy will be sent to each hospital and community health center. Additional copies will be available for purchase for only \$10.00 each (this price includes shipping and handling). To reserve copies now, please contact Shelley Fortier at 617-988-3125 or email shelley.fortier@state.ma.us. The catalog also will be available on the DHCFP web site: www.state.ma.us/dhcfp.